

## **Team Care Program**

**Background** – Team Care is a utilization control program for Medicaid clients with a history of over-using services when there is no underlying medical necessity. These clients need additional assistance when accessing care. Team Care (TC) clients receive enhanced education and strict case management, ensuring they receive “the right care at the right time at the right place”. Enrollment in the program is mandatory for identified clients and continues for a minimum of 24 months.

**Impact on client benefits** – TC clients continue to receive the care they need, they do not lose benefits. They are however “restricted” to certain providers. TC clients are mandated to enroll in the PASSPORT to Health program, select a primary care provider (pcp) to manage their care, receive all Medicaid prescriptions from a single “lock-in” pharmacy, and call the Nurse First Advice Line prior to accessing care, even from their pcp.

**Identification** – TC clients are identified by three methods.

- **Data Analysis** – Claims data is reviewed and clients exceeding a given threshold (i.e. >12 ER visits annually and/or >20 office visits) are identified for enrollment. These clients are then “validated” as appropriate candidates for the program by their pcp. All clients that are provider validated are enrolled in the program.
- **DUR (Drug Utilization Review) Board Referrals** – The DUR Board performs pharmacy reviews of Medicaid’s pharmacy claims. Clients determined to be abusing pharmacy services are automatically enrolled in the program.
- **Provider Referrals** – Montana providers can make direct referrals into the program. Approximately 10% of current enrollment has been derived from provider referrals.

**Costs: \$3.00** Monthly per TC client. An enhanced capitation rate of \$6.00 (a \$3.00 increase per client) is paid to PASSPORT providers for each TC client enrolled on their caseload. McKesson Health Solutions and Department staff share the administration of the program. McKesson’s services for TC are included in the Nurse First Advice Line fees.

**Program Enrollment – 600+** clients. Current program enrollment is over 600 clients. With proven success and additional resources, program enrollment can be expanded to include several thousand of over-utilizing clients.

**Annual TC Client Expenditures – \$3,471,204.** In SFY2004, the sum of the allowed claim amounts paid for 300 Team Care clients totaled \$3.47 million dollars. This equals 11.41 claims PMPM (per member per month) at an amount of \$1,062 PMPM, which is a 420% increase from base TANF client visits of 2.71 PMPM and \$254 PMPM.

**Estimated Annual Savings – \$1.15 Million per 300 clients.** Team Care was launched in August 2004 and no actual savings data is currently available due to claims lag associated with

billing requirements. The following are estimated savings, which would result from decreasing TC clients' service usage by varying percentages. (These figures are derived from FY2004 claims data).

Decrease in Utilization	Annual Savings with 300 Clients	Annual Savings with 400 Clients
20%	\$ 764,791	\$ 1,019,721
25%	\$ 955,989	\$ 1,274,652
<b>30%</b>	<b>\$ 1,147,186</b>	\$ 1,529,582
35%	\$ 1,338,384	\$ 1,784,512
40%	\$ 1,529,582	\$ 2,039,443
45%	\$ 1,720,780	\$ 2,294,373
50%	\$ 1,911,978	\$ 2,549,304